

Los Angeles County's Substance Use Disorder Organized Delivery System

Minutes

CLINICAL SERVICE AND RESEARCH STAKEHOLDER WORKGROUP		
Topic	Physician Consultation Service Benefit Stakeholder Meeting	
Date	July 28, 2016	
Time	9:30 AM – 12:00 PM	
Venue	Conference Room 8050, Building A-8 1000 South Fremont Avenue, Alhambra, CA 91803	
PARTICIPANTS		
Stakeholders	Aegis Treatment Centers Aegis Treatment Centers American Health Services Behavioral Health Services, Inc. Behavioral Health Services, Inc. Behavioral Health Services, Inc. Behavioral Health Services, Inc. Bienestar Human Services Children's Hospital Los Angeles CLARE Foundation, Inc. Didi Hirsch Grandview Foundation Helpline Youth Counseling, Inc. Helpline Youth Counseling, Inc. Live Again Recovery Homes Los Angeles Centers for Alcohol and Drug Abuse Medi-Cure Health Services Phoenix House Phoenix House Prototypes, Inc. Safe Refuge San Fernando Valley Community Mental Health Center, Inc. San Fernando Valley Community Mental Health Centers, Inc. Shields for Families, Inc. Shields for Families, Inc. Southern California Alcohol & Drug Programs, Inc. Southern California Alcohol & Drug Programs, Inc. Special Services for Groups, Inc. Tarzana Treatment Centers Univ. of California, Los Angeles-Integrated Substance Abuse Program	Steve Maulhardt Lyn Raible Vijaya Katukota Candy Cargill-Fuller Jim Gilmore Shirley Summers Oscar Gutierrez Marvin Belzer Diana Cho Olga Felton Lindy Carll Debbie Ma Jihan Mockridge Theodore Herrington William Tarkanian Josephine Kannike-Martins Eugene Kimn Maja Trochimczyk Heather Kurera Nerissa Sibal Katie Phillips Adrienne Sheff Karen Adams Georgea Madeira Kimberly Hendrix Natasha Medina Heidi De Leon Ken Baehvach Desiree Crevecoeur-MacPhail
SAPC Staff	Loretta Denering, Timothy Dueñas, Michelle Gibson, Kristine Glaze, Kry Julie Lo, Kevin Ong, Ashley Phillips, Glenda Pinney, Valerie Sifuentes, E	





MEETING PROCEEDINGS		
Agenda Items	Discussion	
I. Welcome and Introductions	Dr. Gary Tsai, Substance Abuse Prevention and Control (SAPC) Medical Director and Science Officer, opened the meeting by welcoming all participants and providing an update regarding the System Transformation to Advance Recovery and Treatment, Los Angeles County's Substance Use Disorder Organized Delivery System (START-ODS) Implementation Plan.	
II. Stakeholder Process Overview	Dr. Tsai began with an overview of the agenda for the Physician Consultation Service Benefit stakeholder meeting. It was noted that the narrative for this benefit was substantially shorter in length, as opposed to the narratives from previous stakeholder meetings, and comprised of content describing the processes that would be included, should providers be interested in implementing the Physician Consultation Service. Stakeholders also participated in a review of the Physician Consultation Service Request Form following the reading of the narrative, and discussion regarding the role of medical directors and how to engage them further.	
III. Member Expectations and Ground Rules	The expectations for this stakeholder meeting included that each member follow along during the reading of the Physician Consultation Service Benefit narrative by Dr. Tsai, and contribute to discussion through raising questions and comments on the information presented in the narrative.	
IV. Document Review and Discussion	 Workgroup participants reviewed the Physician Consultation Service Benefit narrative and Physician Consultation Request Form, and had the recommendations, comments and questions recorded below: Recommendations In order to make the consultations more beneficial, it would be helpful to rephrase the question regarding the treatment interventions provided on the Physician Consultation Request Form to include the questions that will prompt the description of past interventions and whether they were successful or not. Additionally, providers would like to see more space on the form for this field in order to provide adequate information, aside from attaching supplemental note: and charts. (Dr. Tsai explained to the providers that there will be a PDF fillable format available which will accommodate additional text. Moreover, there will be expansion on the instructional language for the "Treatment Intervention Provided" section on the request form to include instructions such as describing past attempted interventions, both successful and failed, that would allow for a more comprehensive evaluation.) The consultation will be initiated through the Physician Consultation Request Form which will be available in PDF fillable format. The section will expand to accommodate the text. There may be incidents in which there are details that an not included in the original communication. In those cases, additional conversation via phone would be beneficial. Drug Medi-Cal (DMC) physicians, a well as the consultant physicians, are encouraged to initiate phone calls when necessary. The DMC Waiver will be discussed during the Medical Directors Meeting at SAP Headquarter on August 17, 2016. Providers were encouraged to have their physicians attend for informational and networking purposes. 	
	 Providers recommended that SAPC open the Medical Directors Meetings to all medical professionals in addition to the medical directors, including registered nurses. 	





- Providers suggested the implementation of online webinars in an effort to gain more physician participation in trainings and meetings. Their schedules are not always flexible enough to allow in-person gatherings. The agencies pay for physician time including traveling to attend these meetings. If CEUs can be given to the physicians, they may be more incentivized to attend. SAPC will balance the considerations raised with the need for in-person networking.
- Providers indicated that providing informational Medication-Assisted Treatment (MAT) guidelines and protocols online for physicians to access, similar to what other healthcare networks such as LA Care have done, may be a way to familiarize them with SAPC as a resource so that they may engage with SAPC further. SAPC does not plan on writing up its own MAT protocols because the guidelines are constantly changing, but will look into developing other resources or providing compilation of existing protocols and guidelines. Providers are encouraged to visit the Safe Med LA website for MAT related information/resources.
- It would be helpful to expand on the "Reason for Consultation, Relevant History and Clinical Details" section on the request form by including questions to address specific items such as medication dosage and frequency, etc.
- Providers suggested a factsheet to be posted on the SAPC website to provide information, gain the viewers' interest, and direct the viewers to resource links and webinars.
- With the Licensed Practitioners of the Healing Arts (LPHA) signing treatment plans after the DMC-ODS implementation, the medical director's role can be expanded into MAT, withdrawal management, integrated health (integrating physical, mental, and behavioral health), training, clinical supervision, quality improvement projects, and complex case conferences.
- Providers recommended expanding the pool of physicians if there is a need for it.
 Any physician interested in joining in the physician consultation service should contact Dr. Tsai.

Comments

- Providers believe that implementation of withdrawal management services is mostly a capacity issue as there are many individuals on the waitlist for this service. The concern is whether the estimated utilization and capacity is enough for the number of potential participants in LA County.
- The Physician Consultation Service is billable in 15-minute increments, and only if the question/concern involves a specific case and is directly connected to patient care. For now, physicians can bill through Medi-Cal fee-for-service (FFS).
- Regarding physicians prescribing medication in residential settings and conducting physical exams, providers shall refer to MHSUDS INFORMATION NOTICE NO.: 16-039, INTRODUCTION OF INCIDENTAL MEDICAL SERVICES dated July 21, 2016 (http://www.dhcs.ca.gov/provgovpart/Documents/MHSUDS_IN_16-039.pdf) which
 - (http://www.dhcs.ca.gov/provgovpart/Documents/MHSUDS_IN_16-039.pdf) which will be discussed in the Quality Improvement/Utilization Management (QI/UM) Operational Workgroup meeting on September 1, 2016.





Questions

- What if you do not agree with the consultation or specialist?
 - As with any consultation, they are educated opinions. You can reach out to someone else for a second opinion. SAPC is hoping to familiarize itself with the DMC physicians in order to establish a network in case there is a need for additional consultation or second opinions.
- When indicating "non-physicians" in the narrative, are Nurse Practitioners
 (NP) and Physician Assistants (PA) included under the physician category?
 - Standard Terms and Conditions (STC) specify only physician involvement in physician consultation.
- Since LPHAs are being used in other parts of SUD services, why aren't they allowed to initiate consultations?
 - o This service was structured based on the STC. See above.
- Who will initiate the conversation to seek or provide further information regarding the consultation, as needed?
 - Both providers and SAPC should be responsible for communicating with each other for additional information.
- Is this a billable intra-agency process?
 - o It does not appear so at this time since the consultation is between the agency's DMC physician(s) and the County's designated physicians.
- Is the Physician Consultation Request Form a prerequisite for a billable service?
 - Physician Consultation Services are provided by SAPC as a service for its provider network. The time DMC physicians spend seeking physician consultation is not currently a billable service.
- Is there a definition for "Criminal Justice-Involved Patient" on the Physician Consultation Request Form to include patients on parole, probation, etc.?
 - No, the term was meant to be broad.
- Which edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) are we using to fill out the "Diagnosis" section of the form?
 - o DSM-5 is recommended for usage. DSM-IV is also acceptable.
- Can a Licensed Marriage and Family Therapist (LMFT) initiate and bill for physician consultation?
 - o No. This is currently limited to physicians.
- Can the physicians' billing be unbundled so they can bill for reviewing patient's case and lab results, and other services?
 - We have looked at different disciplines and are aiming for parity with the Department of Mental Health's (DMH) rate.

Updates

- The START-ODS Implementation Plan was approved by the Department of Health Care Services (DHCS) on July 27, 2016.

V. Next Steps

Additional feedback may be sent through SAPC's website or email at SUDTransformation@ph.lacounty.gov. Meeting notes will be posted online, and SAPC will update the Physician Consultation Service Benefit narrative as appropriate.



